



2184

PTO/SB/81 (09-03)  
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INDICATION FORM**

Application Number	10/039355
Filing Date	01/03/2002
First Named Inventor	Kenneth M. Kapulka
Title	Method and System For.....
Art Unit	2184
Examiner Name	N/A
Attorney Docket Number	SJO920010044US1

I hereby appoint:

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36,491

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Paik Saber
Signature	
Date	March 1, 2004
Telephone	408-256-2073

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/039355
Filing Date	01/03/2002
First Named Inventor	Kenneth M. Kapulka
Art Unit	2184
Examiner Name	N/A
Attorney Docket Number	SJO920010044US1

I hereby revoke all previous powers of attorney given in the above-identified application.

**RECEIVED**

MAR 24 2004

Technology Center 2100

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

33,224

☒ Please change the correspondence address for the above-identified application to:

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Customer Number:

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OR

<input type="checkbox"/> Firm or Individual Name					
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Paik Saber		
Signature			
Date	March 17 2004	Telephone	408-256-2073

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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